

March 13, 2014

A letter of opposition to Senate Bill 416

To the Public Health Committee Members,

I am writing in opposition to the bill before the committee that eliminates the Emergency Medical Services (EMS) level of certification Advanced Emergency Medical Technician (Senate Bill 416). I feel very strongly that this level is needed in the state of Connecticut in order to provide the ultimate level of care to our most critically ill and injured patients.

I have been an EMS provider in the state of Connecticut for over 30 years, and currently practice as a volunteer paramedic in the Town of Suffield, and teach as an EMS Instructor, the EMT, EMT, and AEMT certification and recertifications for many local Fire/Police and EMS providers through out the state. Furthermore, I have been certified at the EMT, AEMT, and Paramedic levels in my career, having practiced at each level greater than ten years. I first hand know the advantages of having an AEMT partner, and being the AEMT partner.

The AEMT level is designed to be an intermediate certification between the EMT and the Paramedic. It is a program designed for rural and suburban communities to bridge the gap until more advanced care can be accessed – be it from a paramedic, or from an emergency department. The course focuses on advanced assessment skills and treatments that can truly make a difference in patient outcome for the sickest of patients. It is a program designed by subject and length (150-250 hours) to be obtainable by EMS providers who provide care at the volunteer level, are employed full time in other careers and cannot take the longer Paramedic program, or are looking for a stepping program to the next level, Paramedic. I currently have nine students enrolled in an AEMT program. These students come from many walks of life and all volunteer their time as EMS providers, they are enthusiastic and willing to learn. This program is fully approved by the Office of Emergency Medical Services. These students are committed to learning more so they can better serve their patients.

As a paramedic in a suburban community, the value of the AEMT is immeasurable. I openly espouse that the day I earned my paramedic was a day of change for me, the AEMT, as I no longer worked on a guaranteed EMT/ AEMT/ Paramedic crew. My crew was now at times EMT/Paramedic. This in no way implies or states that I am not capable of the best patient care. It does openly state that the best care for the CRITICAL patient comes with the availability of more advanced care providers. Having someone in the ambulance with advanced assessment, scene management and monitoring skills, capability of starting IV lines and administering known life saving medications does make a difference in the critical patient outcome. No matter how I try my two hands cannot manage the airway, start an IV, operate an EKG monitor and draw up and administer medications at the SAME time. With an AEMT on my crew, I can do my job quicker and more proficiently as they share some of the tasks and can perform them just as well as I can. I do not have to prioritize care, with two the job is done faster. My EMT partners are phenomenal, they just cannot perform any of these advanced skills that an AEMT can. Can you imagine being in the Emergency Department trauma room with just a Doctor and no support staff?

In our suburban and rural communities the reality of having two paramedics on the critical calls is not always feasible. The value of the AEMT is immeasurable. The commitment of our providers and the many other AEMTs I have trained is remarkable. These providers are intelligent, competent, and willing to give. They are all willing to advance to the new AEMT level.

Implementation of this program might take a little work on the part of OEMS, but they have experience with the implementation at the EMR, EMT and Paramedic level. The resources from the Federal Government, the blue prints for the initial and transition programs are already written. The textbooks for initial certification and transition exist. It is the responsibility of OEMS to approve and monitor the programs, which they have already demonstrated an ability to do so. The instructors are responsible for the education, and the programs are available and sound in their instructional content.

I ask you, please to not support this bill. The citizens of the state of Connecticut deserve the best of care in the volunteer and commercial world and in the rural, suburban and urban areas. The EMS providers need the availability of this level to be able to advance their skills as time and job and family commitments allow.

As a volunteer, my years as an AEMT were invaluable, and my AEMT partners today are invaluable. We are able to give the best of care to those that truly need it, the critical patients.

Sincerely,

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State of CT and NREMT Paramedic  
EMS Instructor